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Form CPF M 102: Campaign Finan Municipal Form Office of Campaign and Political Finance

JUN 26 2020

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wn Clerk's	Office -	Whitman	

of Massachusetts File with City of Town Clerk's Office Whitman City of Town Clerk of Election Com Fill in Reporting Period dates: Beginning Date: 06/08/2019 Ending Date: File Wiscons Com Z	mission O
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution	n 1
Candidite Full Name (if applicable) Candidite Full Name (if applicable) Committee Name Committee Name Committee Name Committee Name Committee Name Committee Treasurer Committee Treasurer Committee Mailing Address E-mail Rand Committee Mailing Address E-mail Committee Mailing Address E-mail Committee Mailing Address Phone # (optional)	co
SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55 Signed under the penalties of perjury: Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contribution incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report. Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind-contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this randidate in accordance with the requirements of M.G.L. c. 55.	e o

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
	#P#==			
manufacti non sembana, pri manjana janjanan kanana.				
ne 9: Total Receip	ts over \$50 (or listed above)	0		
ine 10: Total Receipts \$50 and under (not listed above)		5		
ne 11: TOTAL RI	CEIPTS IN THE PERIOD		Enter on page 1, line 2	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	ayed a Maria Name of the Committee of th		
ine 9: Total Receipts	over \$50 (or listed above)		
ne 10: Total Receipt	s \$50 and under* (not listed above)	Q	
ne 11: TOTAL RE	CEIPTS IN THE PERIOD	0 -	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include those in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added togethe from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required

Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amoun
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		Line 12: Total Expenditures	over \$50 (or listed above)	0
		Line 13: Total Expenditures	\$50 and under* (not listed above)	0
		Line 14: TOTAL EXPEND		\rightarrow

above. Page

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amou
6 18 200	Midall-Lama Hove Printry Union	6 Rosessist Cords	Landa Sign STAKES	37.5
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The state of the s			Mangalan ping at transmission particular for front in Spranch (public spranch case) transmission and promise and p	
T.		Line 12: Expenditures over \$50	(or listed above)	
NAME OF STREET	Line 13: Expenditures \$50 and under* (not listed above)			
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDITE	IRES IN THE PERIOD	¥ 37.5

* If you have recrired expenditures of \$50 and under, lactude them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itsmize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may t added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contribution	s over \$50 (or listed shows)	
			s \$50 & under (not listed above)	0
	Exter on page 1, line 6 -	Line 17: TOTAL IN-KIND C		Ä

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page

SCHEDULE D: LIABILITIES

M.G.Z. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as v as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amou
			The state of the s	
The second secon	Enter on page 1. line 7 →	Line 18: TOTAL OUTSTAN	DING LIABILITIES (ALIA	M